PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

SAM-0291

CLAIMS AS FILED - PART I (Column 1) (Column 2)									ITITY	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			(Column 1)		(Column 2)			YPE [FEE	OR I [FEE
			10				F	RATE			RATE	
FOR			NUMBER FILED		NUMBER EXTRA		LB	ASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			<i>V w</i> _{minus 20=}		* Ø/			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			3 mir	nus 3 =	* 4			X42=		OR	X84=	
MU	LTIPLE DEPENI	DENT CLAIM P	RESÉNT					+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in						olumn 2	L	TOTAL		OR	TOTAL	7810
CLAIMS AS AMENDED - PART II								•			OTHER	THAN
		(Column 1)		(Colu		(Column 3)		SMALL E	ENTITY	OR .	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM			+140=			+280=	
							L	TOTAL		OR	TOTAL	
										OR	ADDIT. FEE	
		(Column 1) CLAIMS		_	imn 2) HEST	(Column 3)			100	1 1		4001
AMENDMENT B		REMAINING AFTER AMENDMENT		NUN PREV	MBER MOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=	
							Al	TOTAL DDIT. FEE		OR	TOTAL ADDIT: FEE	
		(Column 1)			ımn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=	_	OR	X84=	
L	FIRST PRESE	NTATION OF M	IULTIPLE DE	PENDEN	IT CLAIM	1 🔲	♪ ├					
	If the entry in colu	mn 1 is less than	the entry in col	ımn 2 wri	ite "N" in c	olumn 3	L	+140=		OR	+280=	ļ
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20 " ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3" ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3"												
l	The "Highest Nur	nhar Praviously P	aid For" (Total o	r Indenen	ident) is th	e highest numbe	er four	nd in the ani	propriate bo	x in co	olumn 1	